

Caroline County Health Department

Division of Environmental Health

Leland Spencer, M.D., MPH, Health Officer

Attillio Zarrella, Th.D., Deputy Health Officer

APPLICATION FOR PROPERTY STATUS REPORT

Enclosed is my check for \$30 payable to Caroline County Health Department Please send property status report for property owned by: _____ Located on Road Subdivision: Property Tax ID#: ______ Map: Block/Grid: Parcel: Lot: Applicant's day phone number: _____ Send report to (check all that apply) Mail to: ____ I understand this report may take up to 30 days processing time. Note: original signatures to be submitted, faxed/copied signatures unacceptable Owner's Signature: If you are NOT the owner, then you must fill out the Authorization Form HEALTH DEPARTMENT ONLY DATE REC'D:_____ REC'D BY: ____ RECEIPT# _____ PT# _____ MAIL